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Bib Data Sheet

CONFIRMATION NO. 2907

SERIAL NUMBER 09/785,435	FILING DATE 02/20/2001 RULE	CLASS 348	GROUP ART UNIT 2613	ATTORNEY DOCKET NO. 203185US-2 CIP	
APPLICANTS Mirosław Z. Bober, Surrey, UNITED KINGDOM; Paul A. Ratliff, Surrey, UNITED KINGDOM;					
** CONTINUING DATA ***** <i>Yes GL</i> THIS APPLICATION IS A CIP OF 09/734,595 12/13/2000					
** FOREIGN APPLICATIONS ***** <i>Yes GL</i> UNITED KINGDOM 9930518.7 12/23/1999					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/20/2001					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>GL</i> Verified and Acknowledged <i>GL</i> Examiner's Signature _____ Initials _____		STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 4	TOTAL CLAIMS 57	INDEPENDENT CLAIMS 8
ADDRESS 22850					
TITLE Method and apparatus for transmitting a video image					
FILING FEE RECEIVED 1906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 2907

SERIAL NUMBER 09/785,435	FILING DATE 02/20/2001 RULE	CLASS 348	GROUP ART UNIT 2643	ATTORNEY DOCKET NO. 203185US-2 CIP	
APPLICANTS Mirosław Z. Bober, Surrey, UNITED KINGDOM; Paul A. Ratliff, Surrey, UNITED KINGDOM;					
** CONTINUING DATA ***** This application is a CIP of 09/734,595 12/13/2000					
** FOREIGN APPLICATIONS ***** UNITED KINGDOM 9930518.7 12/23/1999					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/20/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWING 4	TOTAL CLAIMS 57	INDEPENDENT CLAIMS 8
ADDRESS 22850					
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